10 8/3 788
Application or Docket Number
659 0 PO6+

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

2.100.178 00.0001 1, 2000										<u> </u>		
				(Column 1)		(Column 2)		SMALL ENTITY TYPE		OTHER THAN		
TOTAL CLAIMS			32	32.				RATE	FEE	7.	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEI	770.00
TOTAL CHARGEABLE CLAIMS			3 2 minus 20=		. 12			XS 9=	•	OR	X\$18=	216
INDEPENDENT CLAIMS			<u> </u>	9 minus 3 =		1.		X43=		OR	X86=	86
L	ÜLTIPLE DEPE	NDENT CLAIM I	PRESENT	RESENT				+145=		OR	+290=	
• 1	the differenc	e in column 1 is	less than a	less than zero, enter "0" in column 2			L	TOTAL	 	OR	TOTAL	1072
U	-2307 (Column 1)		MENDED - PART II (Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER	THAN
ᄼ	CLAIMS		HIGHE				1 —			1 1		
ENTA		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 32	Minus	- 3	Z	- ,		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	PENDENT/	CI AINA	 - /		X43=		OR	X86≃	
								+145=		OR	+290≈	
α	Inlan						AD	TOTAL DIT. FEE		OR ,	TOTAL CODIT. FEE	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\												
AMENDMENT B	ans	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	1	PLATE	ADDI- TIONAL FEE)[RATE	ADDI- TIONAL FEE
	Total	. 30	Minus	- 3	2	-/-		X\$ 9=	. /	OR	X\$18=)	,
	Independent	MIATION OF A	Minus	DENIDENT S	42	-		X43= ·		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	4290-	7
										OB. F	TOTAL DDIT, FEE	/
	•	(Column 1)		(Columi		(Column 3)		DIT. FEE L	٠, ٠		7	
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST :R :SLY	PRESENT EXTRA	F		ADDI- NONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	* .		=	·×	\$ 9=		OR	X\$18=	
	Independent	ATATION OF AN	Minus	endert C		-	×	(43=		OR	X86=	$\neg \neg$
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									` 	+290=	
~ #	the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." A									T	TOTAL DIT. FEE	
	ne *Highest Numb	per Previously Paid	For" (Total or	Independent) is the i	ighest number	lound b	n the appro	opriste box i	n colun	nn 1.	